

7852 Walker Drive, Suite 200 Greenbelt, Maryland 20770 phone: 301-459-7590, fax: 301-577-5575 internet: www.jsitel.com, e-mail: jsi@jsitel.com

June 24, 2015

Federal Communications Commission Office of the Secretary

VIA HAND DELIVERY

Marlene H. Dortch, Secretary Federal Communications Commission Office of the Secretary 445 12th Street, SW Washington, DC 20554

Re: WC Docket No. 14-58

2015 ETC Annual Report of Hancock Communications, Inc.

Study Area Code 329007

Dear Ms. Dortch:

On behalf of Hancock Communications, Inc., JSI files the attached confidential and redacted versions of the FCC Form 481 ETC annual reporting information pursuant to sections 54.313 and 54.422 of the Commission's rules.\(^1\) Also attached is a letter requesting confidential treatment of section 54.313(a)(2) outage reporting under Sections 0.457 and 0.459.2 The redacted version is also being filed this date via the FCC's Electronic Comment Filing System.

Please direct any questions regarding the filing to the undersigned.

Sincerely,

John Kuykendall JSI Vice President

301-459-7590

jkuykendall@jsitel.com

List ABCDE

No. of Copies rec'd

¹ 47 C.F.R. §§ 54.313, 54.422.

² 47 C.F.R. §§ 0.457, 0.459.



7852 Walker Drive, Suite 200 Greenbelt, Maryland 20770 phone: 301-459-7590, fax: 301-577-5575 internet: www.jsitel.com, e-mail: jsi@jsitel.com

June 24, 2015

ACCEPTED/FILED

JUN 2 4 2015

Federal Communications Commission
Office of the Secretary

Via Hand Delivery

Marlene H. Dortch, Secretary Federal Communications Commission Office of the Secretary 445 12th Street, SW Washington, DC 20554

Re:

WC Docket No. 14-58

2015 ETC Annual Report of Hancock Communications, Inc.

Study Area Code 329007 Request for Confidentiality

Dear Ms. Dortch:

John Staurulakis, Inc. ("JSI"), on behalf of its client, Hancock Communications, Inc. ("Hancock" or "the Company"), hereby requests, pursuant to Sections 0.457 and 0.459 of the Commission's rules, withholding from public inspection certain information contained in an attachment to the report submitted in fulfillment of the above-referenced reporting requirement. The Company provides the following in support of its request, numbered consistent with the subparagraphs of Section 0.459(b).

- 1. The information for which the Company is seeking confidential treatment is an attachment to the Company's annual reporting information pursuant to Sections 54.313 and 54.422 of the Commission's rules ("Report").³
- Eligible Telecommunications Carriers ("ETCs") must file with the Commission the reporting information which is contained in the attachment to the Report pursuant to Sections 54.313 and 54.422.
- 3. The information contained in the attachment to the Report for which Hancock seeks the withholding from public inspection is data pertaining to the Company's outages provided at FCC Form 481 attachment Line 200, Service Outage Reporting. Information of this nature is confidential commercial information routinely withheld from public inspection.

^{1 47} C.F.R. §§ 0.457, 0.459.

² 47 C.F.R. § 0.459(b)(1) through (9).

^{3 47} C.F.R. §§ 54.313, 54.422.

- With respect to identifying the degree to which the attachment concerns a service that is subject to competition, the information pertains to the network and operations of a telecommunications company that has competitors that could benefit if they were able to have access to this information.
- 5. With respect to identifying possible exposure to competitive harm, the information contained in the attachment is information that is not customarily released to the public. Because the telecommunications market is highly competitive, release of this information could substantially harm the Company's telecommunications business.
- With respect to steps the Company has taken to ensure against unauthorized disclosure of the information contained in the attachment, the Company is filing the attachment under seal.
- 7. Any previous versions of this information are not publicly available.
- 8. Because the information is not routinely available, a need exists for maintaining the confidentiality of this information permanently.
- 9. The Commission has previously concluded that there is a presumptive likelihood of substantial competitive harm from disclosure of outage information.⁴ The Commission also determined the disclosure of outage reporting information to the public could present an unacceptable risk of more effective terrorist activity and could therefore result in potential harm to the public and the national defense.

Based on the preceding, JSI respectfully requests on behalf of the Company that the Commission grant confidential treatment under Section 0.459 to FCC Form 481 attachment at Line 200, Service Outage Reporting. Please contact the undersigned with any questions regarding this request.

Sincerely,

She Klandell

John Kuykendall JSI Vice President

301-459-7590

jkuykendall@jsitel.com

⁴ See In the Matter of New Part 4 of the Commission's Rules Concerning Disruptions to Communications, ET Docket No. 04-35, Report and Order and Further Notice of Proposed Rulemaking, FCC 04-188, rel. Aug. 19, 2004, para. 45.

STATE OF THE STATE OF	m 481 - Carrier Annual Reporting CTED - Data Collection Form	JIXT		y3013
1,000,000	Study Area Code	329007		ACCEPTED/FILED
	Study Area Name	HANCOCK COMMUN	NICATIONS, INC.	- I CO/FILED
<020>	Program Year	2016		JUN 2 4 2015
<030>	Contact Name: Person USAC should contact with questions about this data	Kim Gerard		
<035>	Contact Telephone Number: Number of the person identified in data line <030>	3173232105 ext	:.	Office of the Secretary
<039>		kgerard@ninest	arconnect.com	
PU T				\$4,389 54,422
ANNU	L REPORTING FOR ALE CARRIERS			Completion Contracto Required Sequired (check box when complete)
<100>	Service Quality Improvement Reporting		(complete attached worksh	eet) / //////
<200>	Outage Reporting (voice)		(complete attached worksh	eet)
<210> <300>	Unfulfilled Service Requests (voice) 0	o outages to report		1 11111
1300 2	Officialistic Service Requests (voice)			
<310>	Detail on Attempts (voice)			
				(attach descriptive document)
<320>	Unfulfilled Service Requests (broadband)			
<330>	Detail on Attempts (broadband)			Willi
				(attach descriptive document)
<400>	Number of Complaints per 1,000 customers (voice)			
<410>	Fixed 0.0	_		1 1
<420> <430>	Mobile 0.0 Number of Complaints per 1,000 customers (broad	band)		0.534.5
<440>	Fixed			
<450> <500>	Mobile Service Quality Standards & Consumer Protection F	Rules Compliance	(check to indicate certifica	ntion)
	329007in510.pdf		\neg	
<510>	:1		(attached descriptive do	ocument) ✓ ✓
	1			
<600>	Functionality in Emergency Situations		(check to indicate certifica	ition)
4000	329007in610.pdf			
			(attached descriptive docu	ment)
<610>				
<700>	Company Price Offerings (voice)		(complete attached works	heet)
<710>	Company Price Offerings (broadband)		(complete attached works	heet)
<800>	0 0		(complete attached works	
	Tribal Land Offerings (Y/N)? Voice Services Rate Comparability Certification		(if yes, complete attached works Yes	/ IIIIII
<1010	>		(attach descriptive docum	nent)
<1100	> Certify whether terrestrial backhaul options exist (Yes or No)	(if not, check to indicate	certification)
<1110	s	1	(complete attached works	theet)
<1200	> Terms and Condition for Lifeline Customers		(complete attached works	theet)
	Price Cap Carriers, Proceed to Price Cap Additional			
<2000>	Including Rate-of-Return Carriers affiliated with P	rice cap Local Exc	change Carriers (check to indicate certifica	tion)
<2005>			(complete attached works	heet)
<3000>	Rate of Return Carriers, Proceed to ROR Additiona	Documentation	Worksheet (check to indicate certificate)	tion)
<3005>		İ	(complete attached works	12 2 2 2 2

	ervice Quality Improvement Reporting	A Maria Talahari Inda	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. July 2013	3060-0819
<010>	Study Area Code	329007		
<015>	Study Area Name	HANCOCK COMMUNICATIONS, INC.		
<020>	Program Year	2016	V V V V V V V V V V V V V V V V V V V	
<030>	Contact Name - Person USAC should contact regarding this data	Kim Gerard		
<035>	Contact Telephone Number - Number of person identified in data line <030>	3173232105 ext.		
<039>	Contact Email Address - Email Address of person identified in data line <030>	kgerard@ninestarconnect.com		
<110>	Has your company received its ETC certification from the FCC? If your answer to Line <110> is yes, do you have an existing \$54.202(a) "5	(yes / no) O O		
<111>	year plan" filed with the FCC?	(yes/no) O O	76	
<112>	report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service. Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your of CETC which only receives frozen support, your progress report is only required to address voice telephony service.	company is a		
	Please select the appropriate responses below (Yes, No, Not Applicable) to confit that the attached document(s), on line 112, contains a progress report on its five service quality improvement plan pursuant to §54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	e-year	Name of Attached Document	
<113>	Maps detailing progress towards meeting plan targets			
<114>	Report how much universal service (USF) support was received			
<115>	How much (USF) was used to improve service quality and how support was used to impro	ove service quality		
:116>	How much (USF) was used to improve service coverage and how support was used to imp			
	How much (USF) was used to improve service capacity and how support was used to impr	rove service capacity		
<117>				

	rvice Outage Reporting (Voice) lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	329007	
<015>	Study Area Name	HANCOCK COMMUNICATIONS, INC.	
<020>	Program Year	2016	
<030>	Contact Name - Person USAC should contact regarding this data	Kim Gerard	
<035>	Contact Telephone Number - Number of person identified in data line <030>	3173232105 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	kgerard@ninestarconnect.com	

<220>	<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<₽	<g></g>	<h>></h>
2207	NORS Reference Number		Outage Start Time		Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
							See attached rksheet				-	

The second control of the second	ce Offerings including Voice Rate Data lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	329007
<015>	Study Area Name	HANCOCK COMMUNICATIONS, INC.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Kim Gerard
<035>	Contact Telephone Number - Number of person identified in data line <030>	3173232105 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kgerard@ninestarconnect.com
<701>	Residential Local Service Charge Effective Date 1/1/2015	
<702>	Single State-wide Residential Local Service Charge	

<703>

State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	cb45 State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fed
10000								
				See a	tached worksheet			

200 Sept. 100 Se	adband Price Offerings ection Form	ECC Form 481 GMB Control No. 3060-0866/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	329007
<015>	Study Area Name	HANCOCK COMMUNICATIONS, INC.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Kim Gerard
<035>	Contact Telephone Number - Number of person identified in data line <030>	3173232105 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kgerard@ninestarconnect.com

State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select
		-						
		-						
		-						
	_	+						

	erating Companies ection Form				di e s	FCC Form 483 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		329007			
<015>	Study Area Name		HANCOCK COMMUN	ICATIONS, INC.		
<020>	Program Year		2016			
<030>	Contact Name - Person USAC sh	ould contact regarding this data	Kim Gerard		100	
<035>	Contact Telephone Number - N	umber of person identified In data line <030>	3173232105 ext			time to the second seco
<039>	Contact Email Address - Email A	ddress of person identified in data line <030>	kgerard@ninest	carconnect.com		
<810>	Reporting Carrier Cent	ral Indiana Communications, Inc. d/b/a N	ineStar Communi	cations		
<811>	Holding Company Nine	Star Connect				
<812>	Operating Company Cent	ral Indiana Communications, Inc. d/b/a N	VineStar Communi	cations		
<813>		GD		425	The second second	495
		Affillates		SAC	Doing	Business As Company or Brand Designation

SELECT STREET,	bal Lands Reporting lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. Suly 2013	3060-0819
<010>	Study Area Code		329007	
<015>	Study Area Name		HANCOCK COMMUNICATIONS, INC.	
<020>	Program Year		2016	
<030>	Contact Name - Person USAC should contact regarding this data		Kim Gerard	
<035>	Contact Telephone Number - Number of person identified in data line		3173232105 ext.	
<039>	Contact Email Address - Email Address of person identified in data line	<030>	kgerard@ninestarconnect.com	
<910>	Tribal Land(s) on which ETC Serves			
	ä			
<920>	Tribal Government Engagement Obligation		Name of Attached Document	
If your c	company serves Tribal lands, please select (Yes,No, NA) for each these boxes			
	rm the status described on the attached document(s), on line 920,			
	trates coordination with the Tribal government pursuant to	S	elect	
	3(a)(9) includes:	100000	s or No or Applicable	
<921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions.	187		
<922>	Feasibility and sustainability planning;			
<923>	Marketing services in a culturally sensitive manner;			
<924>	Compliance with Rights of way processes			
<925>	Compliance with Land Use permitting requirements			
<926>	Compliance with Facilities Siting rules			
<927>	Compliance with Environmental Review processes			
<928>	Compliance with Cultural Preservation review processes			
1020	compliance than contain i react ration retient processes			

March 1 and 10 to	lo Terrestrial Backhaul Reporting llection Form	PEC Form 481 DMB Control No. 3060-0986/DMB Control No. 3060-0819 July 2013
<010>	Study Area Code	329007
<015>	Study Area Name	HANCOCK COMMUNICATIONS, INC.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Kim Gerard
<035>	Contact Telephone Number - Number of person identified in data line <030>	3173232105 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kgerard@ninestarconnect.com
<1120>	Please confirm whether terrestrial backhaul options exist within the supported area pursuant to § 54.313(g) (Yes, No).	
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 upstream within the supported area pursuant to § 54.313(g).	kbps

Lifeline	rms and Condition for Lifeline Customers ection Form	FCC Form 481 QNIB Control No. 3060-0986/QMB Control No. 3060-0819 July 2013
<010>	Study Area Code	329007
<015>	Study Area Name	HANCOCK COMMUNICATIONS, INC.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Kim Gerard
<035>	Contact Telephone Number - Number of person identified in data line <030>	3173232105 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kgerard@ninestarconnect.com
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	Name of Attached Document
<1220>	Link to Public Website HTTP	http://www.ninestarconnect.com/community/lifeline-program/
or the we	neck these boxes below to confirm that the attached document(s), on line 1210, besite listed, on line 1220, contains the required information pursuant to a)(2) annual reporting for ETCs receiving low-income support, carriers must eport:	
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	
<1222>	Details on the number of minutes provided as part of the plan,	
<1223>	Additional charges for toll calls, and rates for each such plan.	

Data Coll	ice Cop Carrier Additional Documentation ection Form Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers	FCC Form 481 OMB Cantrol No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	
<015>	Study Area Name	329007
<020>	Program Year	HARCOCK COMMUNICATIONS, INC.
<030>	Contact Name - Person USAC should contact regarding this data	2016
<035>	Contact Telephone Number - Number of person identified in data line <030>	Aim Gerard
<039>	Contact Email Address - Email Address of person identified in data line <030>	3173232109 ext.
-		kgerard@ninestarconnect.com
	America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The inform	a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, mation reported on this form and in the documents attached below is accurate.
	Incremental Connect America Phase I reporting	
<2010>	2nd Year Certification (47 CFR § 54.313(b)(1)i)	Δ
<2011a>	3rd Year Certification (47 CFR § 54.313(b)(1)ii)	
<2011b>	Attachment (47 CFR § 54.313(b)(1)ii)	
		Name of Attached Document(s) Listing Required Information
	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))	·
<2012>	2013 Frozen Support Calculation (47 CFR § 54.313(c)(1))	
<2013>	이 사람이 있다면 하는 이 자연하는 아이에 들어가면 하다 하다 하다 하게 되었다면 하는 사람이 되었다. 사람이 아이를 하는 것이 없는 사람이 되었다면 하는 것이 없는 것이다.	
<2014>	스트	
<2015>	2016 and future Frozen Support Calculation (47 CFR § 54.313(c)(4))	
	Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))	·
<2016>	Certification Support Used to Build Broadband	
	Connect America Phase II Reporting {47 CFR § 54.313(e)}	
<2017>		
<2018>	5th year Broadband Service Certification	
<2019>	Interim Progress Certification	
<2020>		ne 2021, contains the required information
	pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support si addresses of community anchor institutions to which began providing preceding calendar year.	hall provide the number, names, and gaccess to broadband service in the
<2021>	Interim Progress Community Anchor Institutions	
53000		
		Name of Attached Document(s) Listing Required Information

1000) Ru	eta Of Return Carrier Additional Documentation	PCC Form 481
	ection Form	QMS Control No. 3040-0006/OMB Control No. 3060-0019
		A Section of the sect
<010>	Study Area Code	329007
<015>	Study Area Harne	HANCOCK COMMUNICATIONS, INC.
<020>	Program Year	2016
<035>	Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030>	Kim Gerard 3173232105 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kgerard@ninestarconnect.com
CHECK t		nt to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in
	CFR 9 54.313(T)(2). I further certify that th	ne information reported on this form and in the documents attached below is accurate.
	an annexa ann ann an agus in teagraigh	e **
(3010)	Progress Report on 5 Year Plan	
	Milestone Certification (47 CFR § 54.313(f)(1)(i))	
		Name of Attached Document Listing Required Information
(3011)	Please check this box to confirm that the attached document(s), on line 3 § 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addreproviding access to broadband service in the preceding calendar year.	3012 contains the required information pursuant to assess of community anchor institutions to which began
/2012\	Community Assistants along (47 CFR 5 54 212/0/19/9)	,
(3012)	Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))	
		Name of Attached Document Listing Required Information
(3013)	Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2))	(Yes/No)
	If yes, does your company file the RUS annual report	(Yes/No)
Please	check these boxes to confirm that the attached document(s), on line 3017	7, contains the required information pursuant to § 54.313(f)(2) compliance requires:
	Electronic copy of their annual RUS reports (Operating Report for	, serialite de regalies montassir paresant es 3 e-15 ref/As) companies regalies.
(3013)	Telecommunications Borrowers)	-
(3016)	Document(s) for Balance Sheet, Income Statement and Statement of Car	sh Flows
(3017)	if the response is yes on line 3014, attach your company's RUS annual	
	report and all required documentation	
		Name of Attached Document Listing Required Information
(2019)	If the response is no on line 3014, is your company audited?	(Yes/No) Q(Q
(2010)		(institut) Laboratoria
	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains	
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a fo	ormat comparable to RUS Operating Report for Telecommunications
31 13		Anna companio do nos operating report for resconnanciations
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Co	ash Flows
(3021)	Management letter and audit opinion issued by the independent certified pu	ublic accountant that performed the company's financial audit
	[HERE] : 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2),	
	contains:	
(3022)	Copy of their financial statement which has been subject to review by an	
	independent certified public accountant; or 2) a financial report in a	
	format comparable to RUS Operating Report for Telecommunications Borrowers.	
(3023)	Underlying information subjected to a review by an independent certified	
(5025)	public accountant	
(3024)	Underlying information subjected to an officer certification.	
(3025)	Document(s) for Balance Sheet, Income Statement and Statement of Ca	ish Flows
(3026)	Attach the worksheet listing required information	

	action Form	Only Control No. 3000-0593/Dist Colored No. 5000-0315
<010>	Study Area Code	329007
<015>	Study Area Name	HANCOCK COMMUNICATIONS, INC.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Kim Gerard
<035>	Contact Telephone Number - Number of person identified in data line <030>	3173232105 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kgerard@ninestarconnect.com
N. Carlotte		

Financial Data Summary	
(3027) Revenue	
(3028) Operating Expenses	
(3029) Net Income	
(3030) Telephone Plant In Service(TPIS)	
(3031) Total Assets	(4)
(3032) Total Debt	
(3033) Total Equity	
(3034) Dividends	

Data Coll	ion-Reporting Carrier ection Form	FGC Form 481 ON/B Control No. 3060-0986/GAAS Control No. 3060-0619 July 2013
<010>	Study Area Code	329007
<015>	Study Area Name	HANCOCK COMMUNICATIONS, INC.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Kim Gerard
<035>	Contact Telephone Number - Number of person identified in data line <030>	3173232105 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kgerard@ninestarconnect.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

	certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support ecipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.					
Name of Reporting Carrier:	The state of the s					
Signature of Authorized Officer:	Date					
Printed name of Authorized Officer:						
Title or position of Authorized Officer:						
Telephone number of Authorized Officer:						
Study Area Code of Reporting Carrier:	Filing Due Date for this form:					

	ion - Agent / Carrier ection Form	FOC Form 481 OMB Control No. 3060-0986/OAR Control No. 3060-0919 Adv 2013
<010>	Study Area Code	329007
<015>	Study Area Name	HANCOCK COMMUNICATIONS, INC.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Kim Gerard
<035>	Contact Telephone Number - Number of person identified in data line <030>	3173232105 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kgerard@ninestarconnect.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

certify that (Name of Agent) <u>John Staurulakis</u> , <u>Inc.</u> is authorized to submit the information reported on behalf of the reporting carrier. I so certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized gent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.					
Name of Authorized Agent: John Staurulakis, Inc.					
Name of Reporting Carrier: HANCOCK COMMUNICATIONS, INC.					
Signature of Authorized Officer: CERTIFIED ONLINE	Date:	06/23/2015			
Printed name of Authorized Officer: Scott Hiatt					
Title or position of Authorized Officer: CFO					
Telephone number of Authorized Officer: 3173263131 ext.					
Study Area Code of Reporting Carrier: 329007 Fil	ng Due Date for this form: 07/01/2015				

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier 1, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.

Name of Reporting Carrier: HANCOCK COMMUNICATIONS, INC.

Name of Authorized Agent or Employee of Agent: JSI

Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE Date: 06/23/2015

Printed name of Authorized Agent or Employee of Agent: Cassandra Heyne

Title or position of Authorized Agent or Employee of Agent Consultant

Telephone number of Authorized Agent or Employee of Agent: 3014597590 ext.

Study Area Code of Reporting Carrier: 329007 Filing Due Date for this form: 07/01/2015

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. § 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

Attachments

Central Indiana Communications, Inc. d/b/a NineStar Communications Demonstration of Compliance with Applicable Service Quality Standards and

Consumer Protection Rules

In establishing this certification in its 2005 ETC Order,¹ the FCC found that an ETC must make "a specific commitment to objective measures to protect consumers." ² The Commission found that for wireless ETCs, compliance with CTIA's Consumer Code for Wireless Service would satisfy this requirement" and that the sufficiency of other commitments would be considered on a case-by-case basis. ³ In this context, the FCC stated, "to the extent a wireline or wireless ETC applicant is subject to consumer protection obligations under state law, compliance with such laws may meet our requirement." ⁴

Central Indiana Communications, Inc. d/b/a NineStar Communications

("Company") hereby certifies that it is complying with applicable service quality

standards and consumer protection rules. The Company is subject to consumer

protection obligations under the Indiana Code (IC) and Indiana Administrative Code

(IAC). These obligations include, but are not limited to, the following: (1) adherence to

Indiana state consumer protection requirements governing telephone providers which

include Quality of Service rules as identified in IC 8-1-17.5-24, and Compliance with

¹ Federal-State Joint Board on Universal Service, CC Docket No. 96-45, Report and Order, FCC 05-46 (rel. Mar. 17, 2005) ("2005 ETC Order").

² Id. at para. 28.

³ Id. The FCC noted that under the CTIA Consumer Code, wireless carriers agree to: "(1) disclose rates and terms of service to customers; (2) make available maps showing where service is generally available; (3) provide contract terms to customers and confirm changes in service; (4) allow a trial period for new service; (5) provide specific disclosures in advertising; (6) separately identify carrier charges from taxes on billing statements; (7) provide customers the right to terminate service for changes to contract terms; (8) provide ready access to customer service; (9) promptly respond to consumer inquiries and complaints received from government agencies; and (10) abide by policies for protection of consumer privacy." Id. at n. 71.

Anti-Slamming and Anti-Cramming Procedures as adopted in IC 8-1-29-5, Rule 1.1 170 IAC 7-1.3-8.1; (2) truth-in-billing requirements as required in Rule 1.3 170 IAC 7-1.3-6; and (3) CPNI, Red Flag Rules and other applicable federal and state requirements governing the protection of customers' privacy.

The Company is subject to consumer protection obligations for broadband services under federal law. These obligations include, but are not limited to, the following: public disclosure of accurate information regarding network management practices, performance, and commercial terms of broadband internet access services; as a means of providing sufficient information for consumers to make informed choices regarding use of such services, and for content, application, service and device providers to develop, market, and maintain internet offerings as specified in F.C.C. 47 C.F.R. Part 8 §8.3. The Company furthermore will comply with all requirements set forth in the 2015 Open Internet Order when it becomes effective.

Central Indiana Communications, Inc. d/b/a NineStar Communication's

Demonstration of Ability to Function in Emergency Situations

Central Indiana Communications, Inc. d/b/a NineStar Communications

("Company") hereby certifies that it is able to function in emergency situations as set

forth in the Code of Federal Regulations, Title 47, Part 54, Subpart C, §54.202(a)(2)¹ and

Rule 1.2, 170 IAC 7-1.2-18 of the Indiana Administrative Code. The Company's voice

and broadband network is designed to remain functional in emergency situations without

an external power source, is able to reroute traffic around damaged facilities, and is

capable of managing traffic spikes resulting from emergency situations as required by

Section 54.202(a)(2). The Company can change call routing translations as needed to

reroute traffic around damaged facilities. Changing call routing translations will also

allow the Company to manage traffic spikes throughout its network, as emergency

situations require.

Specifically, each central office building is supplied with standby generators and battery back-up that enable the central office to keep running until power is restored so long as fuel is available, or until system changes are made to reroute traffic. In accordance, and compliance, with Rule 1.2, 170 IAC 7-1.2-18, all switching offices or equivalent with installed emergency power generating equipment have a minimum of three (3) hours battery capacity; switching offices or equivalent without installed emergency power generating equipment have a minimum battery capacity of five (5) hours.

Section 54.202(a)(2) requires ETCs that are designated by the Commission to "demonstrate its ability to remain functional in emergency situations, including a demonstration that it has a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations."

ata Collecti		orting (Vo	nce)	A				•	FCC Form 481 OMB Control N July 2013	o. 3060-0986/OMB Cor	ntrol No. 3060-0819
<010> St	udy Area Code						329007				
<015> St	udy Area Nam	e					HANCOCK CO	ICATIONS, INC.		- Swell	19, 10,5,111
<020> Pr	ogram Year			- 11 W		1/1/2	2016	4			
		Person US	AC should cont	act regardi	ng this data		Kim Gerard				
					ntified in data li	ne <030>	3173232105	50			
					ntified in data i		kgerardenin	arconnect.com			
<220>											
<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<<1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<₽>	<h>></h>
NORS Reference Number	Outage Star	Outage	Outage End Date	Outage	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
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1 The Control of the	ce Offerings Including Voice Rate Data lection Form	FCC Form 482 7 OM8 Control No: 9060-0986/OM8 Control No. 3060-0819 July 2013
<010>	Study Area Code	329007
<015>	Study Area Name	HANCOCK COMMUNICATIONS, INC.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Kim Gerard
<035>	Contact Telephone Number - Number of person identified in data line <030>	3173232105 ext. •
<039>	Contact Email Address - Email Address of person identified in data line <030>	kgerard@ninestarconnect.com
<701>	Residential Local Service Charge Effective Date 1/1/2015	
<702>	Single State-wide Residential Local Service Charge	

<703>

State	<a2> Exchange (ILEC)</a2>	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	KBS> Mandatory Extended Area Service Charge	Total per line Rates and Fed
IN	Wilkinson		FR	17.5	3.5	0.11	0.0	21.11
IN	Shirley		FR	14.5	3.5	0.09	0.0	18.09
							18889	
						3		

			p-1877					

Sept.	erating Companies ection Form	A company of the comp	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 Arty 2013			
<010>	Study Area Code		329007			
<015>	Study Area Name		HANCOCK COMMUNICATIONS, INC.			
<020>	Program Year	The state of the s	2016			
<030>	Contact Name - Person U	ISAC should contact regarding this data	Kim Gerard			
<035>	Contact Telephone Numi	ber - Number of person identified in data line <030>	3173232105 ext.			
<039>	Contact Email Address - I	Email Address of person identified in data line <030>	kgerard@ninestarconnect.com			
<810>	Reporting Carrier	Central Indiana Communications, Inc. d/b/a	NineStar Communications			
<811>	Holding Company	NineStar Connect				
<812>	Operating Company	Central Indiana Communications, Inc. d/b/a	NineStar Communications			

Affiliates	SAC	Doing Business As Company or Brand Designation
Hancock Rural Telephone Corporation	320775	NineStar Connect
		0.000